

10/583917

IAP5 Rec'd PCW/TC 21 JUN 2006

Application Data Sheet

**Application Information**

Application Type:: National Stage  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: ARRANGEMENT IN CONNECTION WITH  
CROSSCUTTING SAW OF HARVESTER  
Attorney Docket Number:: 3501-1117  
Request for Early  
Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 1  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent No  
Appl.?::

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**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FINLAND  
Status:: Full Capacity  
Given Name:: JORMA  
Middle Name::  
Family Name:: HYVÖNEN  
Name Suffix::  
City of Residence:: IISALMI  
State or Province of Residence::  
Country of Residence:: FINLAND  
Street of Mailing Address:: KUKKULAKUJA 12  
Address::  
City of Mailing Address:: IISALMI  
State or Province of Mailing Address::  
Country of Mailing Address:: FINLAND  
Postal or Zip Code of Mailing Address:: FIN-74120

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FINLAND  
Status:: Full Capacity  
Given Name:: MARKKU  
Middle Name::  
Family Name:: HUTTUNEN  
Name Suffix::  
City of Residence:: IISALMI  
State or Province of Residence::  
Country of Residence:: FINLAND  
Street of Mailing Address:: AURINGONKEHRÄ 8 C 20  
Address::  
City of Mailing Address:: IISALMI

State or Province of Mailing Address::

Country of Mailing Address:: FINLAND

Postal or Zip Code of Mailing Address:: FIN-74120

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FINLAND

Status:: Full Capacity

Given Name:: EERO

Middle Name::

Family Name:: HOTTI

Name Suffix::

City of Residence:: SONKAJÄRVI

State or Province of

Residence::

Country of Residence:: FINLAND

Street of Mailing PYÖREENMÄENTIE 161

Address::

City of Mailing Address:: SONKAJÄRVI

State or Province of Mailing Address::

Country of Mailing Address:: FINLAND

Postal or Zip Code of Mailing Address:: FIN-74300

**Correspondence Information**

Correspondence Customer 00466

Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FI2004/000787	12/21/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FINLAND	20031893	12/22/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::